Instructions for Registering Children Birth to 3 years for Federal Quota Funds 2016 APH Registration of Legally Blind Children

Enrollment As of: Monday, January 4, 2016

Deadline for Return of Registration Form: February 1, 2016

Statement of Confidentiality

All personally, identifiable data collected for this registration will be considered confidential and treated as such. The MO Instructional Resource Center at the Missouri School f/t Blind collects this information and submits it to the American Printing House for the Blind to generate federal funding for educational materials.

Who to Register - Eligibility for Federal Quota Registration

To be eligible for registration in the Federal Quota Program, children **MUST** meet the following criteria, as outlined in the **Act to Promote the Education of the Blind**:

- Meet the definition of legal blindness (call Yvonne Ali for assistance):
 "central visual acuity of 20/200 or less in the better eye with best correction; a peripheral field of vision no greater than 20 degrees; or
- Functions at the definition of blindness (FDB)
 "when visual performance is reduced by a brain injury or dysfunction as determined by an eye care specialist or medical doctor". Infants in this category may manifest unique visual characteristics often found in conditions re-
- Be enrolled in a formally organized public or private, nonprofit educational program of less than college level (First Steps qualifies)
- Be enrolled with the registering agency on Monday, January 4, 2016

ferred to as neurological, cerebral, or cortical visual impairment.

Eligibility of Infants or Toddlers

Register eligible infants and toddlers if enrolled in a formally organized, regularly scheduled educational or training program such as First Steps and have a written education plan (e.g. an IFSP).

Required Documentation

The following documents for each registered child must be on file in the event that an audit requires evidence of the child's educational program or visual acuity. Do **not** submit these to APH **nor** to the Missouri Instructional Resource Center.

- Written Education Plan to verify that the child is in a formally organized educational program; it may be an Individualized Family Service Plan, or any other written action plan.
- Current Eye/Medical Report by an ophthalmologist, optometrist, or medical doctor must be on file at the agency who registers the child. A report from an eye care specialist or medical doctor is acceptable for children classified as "Functions at the Definition of Blindness".

Gathering the Data

You may wish to gather data from your Service Coordinators or Early Intervention Teams, compile one list for your SPOE, and forward that list to Yvonne Ali (address below).

Completing the Registration Form

Children must be re-registered each year. Therefore, if a child in your region was registered in 2015, you must do so again for 2016. This registration packet contains a blank registration form. If you have a form with a child that were registered by your SPOE in last year, consider this your 2016 Preliminary Registry.

- 1. Review your caseload and eligibility and documentation requirements to determine a child's eligibility
- 2. If you registered a child last year that will be deleted for 2016, please include a note on the list for that child indicating why he/she is not registered (e.g., "moved to unknown", "deceased", "transitioned to Columbia Schools", etc.). There is a data field to indicate the school district to which a child will transition at the age of 3.
- 3. Add any new child on the registration form by completing all data fields. For each eligible child, the following data MUST be reported:

- Name (first and last name)
- County of Residence (Please list the county in which the child resides)
- Date of birth
- Measurement of vision in right eye (contact Yvonne Ali for assistance; see contact info below)
- Measurement of vision in left eye (contact Yvonne Ali for assistance)
- Language used for Instruction
- Vision Services
- School district to which the child will transition at age 3

If you do not have any children in your area to report, check the box for to indicate that you have no children to report and return form to Yvonne Ali at the address below.

Measurement of Vision with Correction

- Contact Yvonne Ali (see contact info below) if you need assistance to determine visual acuities. It can be challenging to determine how to code the visual acuities.
- Vision measurements performed by an ophthalmologist or optometrist must be indicated for each child. These visual
 measurements are to be reported using only the codes listed below.
- A separate measurement must be given for each eye.
- Measurements should be stated in terms of distance on the Snellen Chart whenever possible. Diseases of the eye and
 eye conditions are NOT acceptable reporting codes.
- Even in the case of a non-communicative or non-responsive child, there must be verification that he/she meets the definition of blindness. An eye report may characterize the visual response as "blinks to light" (BTL), "fixes and follows" (F&F), "central steady maintained" (CSM), or some variation of these descriptors.
- "Functions at the Definition of Blindness" (FDB) is a category indicating blindness due to brain injury or dysfunction as determined by an eye care specialist, neurologist, or other medical doctor. Children in this category manifest unique visual characteristics often found in conditions referred to as neurological, cerebral, or cortical visual impairment.

| Reporting Code | Visual Measurement |
|-----------------------------|---|
| For example: 20/200, 20/400 | Distance vision: 20/200 or less with maximum correction using the Snellen Chart; or, if the eye measurements are determined on an eye chart other than Snellen and measures in the range of 20/101 to 20/199, report this child as legally blind |
| For example: VF 20, VF 6 | Visual field of 20 degrees or less (Add the degree of restriction after the VF code, for example: VF20) |
| CF | Counts Fingers: Use only when an eye specialist finds it is not possible to use the Snellen Chart. |
| FDB | Functions at the Definition of Blindness: Use when visual functioning is reduced by brain injury/dysfunction and visual acuity is not possible to determine using the Snellen Chart. |
| НМ | Hand Movements: Use only when an eye specialist finds it is not possible to use the Snellen Chart. This may be noted on the eye report as F&F (fixes and follows) or some variation of this descriptor. |
| OP | Object Perception - Use only when an eye specialist finds it is not possible to use the Snellen Chart. This may be noted on the eye report as CSM (central steady maintained if an object is used in testing) or some variation of this descriptor. |
| LP | Light Perception only or perceives and localizes light – This may be noted on eye report as LPP (light perception with projection), BTL (blinks to light) or CSM (central steady maintained if light is used in testing). If CSM is reported but the stimulus used in testing is not indicated, use Light Perception as the eye measurement. |
| NIL | Totally Blind with no light perception |

Vision Services: Mark "Yes" or "No" to indicate whether a child receives services from a teacher certificated in the education of children who are visually impaired. Vision services may include direct service or consultation.